Allen D. Hertz, et al.

HER-04-01

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION FOR UTILITY OR

DESIGN

Attorney Docket Number

First Named Inventor

| PATENT APPLICATION | | | COMPLETE IF KNOWN | | | | |
|--|---------------------|----------------------------|-------------------------|--|---------------------------------------|---------------|--|
| (37 CF | R 1.63) | A | pplication Number | | <u>.</u> | | |
| X Declaration | Declarat | ion | iling Date | Februa | ry 24, 200 |)4 | |
| Submitted OR With Initial | Submitte Filing (se | ed after Initial Aurcharge | rt Unit | | · · · · · · · · · · · · · · · · · · · | | |
| Filing | (37 ČFR required | 1.16 (e)) E | xaminer Name | | | | |
| I hereby declare that: | | | | | | | |
| Each inventor's residence, ma | iling address, a | nd citizenship are as | stated below next to | their name. | | | |
| I believe the inventor(s) named below to bethe original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | | | | |
| | | | | | | | |
| METHOD A | ND APPAR | ATUS FOR MA | INTAINING OP | ERABILITY | OFA | | |
| FLEXIBI | E, SELF | CONFORMING, | WORKPIECE S | UPPORT SY | (STEM | | |
| | | | | | |] | |
| the specification of which | | (Title of the Ir | nvention) | | | | |
| च्या | | | | | | | |
| is attached hereto | | | | | | • | |
| OR | | | | | | | |
| was filed on (MM/DD/Y | vvv [| · | as United States A | onlication Numb | ner or PCT li | nternational | |
| — was most on (with BB). | | | as Officed Otates Ap | | | : | |
| Application Number | | and was amended | on (MM/DD/YYYY) | | (if | applicable). | |
| I hereby state that I have revie | | | f the above identified | specification, ir | ncluding the | claims, as | |
| amended by any amendment | specifically refe | rred to above. | | | | | |
| I acknowledge the duty to di | | | | | | | |
| continuation-in-part applicatio and the national or PCT intern | | | | n the filing date | e of the prio | r application | |
| I hereby claim foreign priority | | | | f any foreign a | application(s |) for patent, | |
| inventor's or plant breeder's r | ights certificated | (s), or 365(a) of any | PCT international ap | plication which | designated | at least one | |
| country other than the United application for patent, invento | | | | | | | |
| before that of the application of | on which priority | is claimed. | ec(5), or any ror mic | mational applic | adon naving | a ming date | |
| Prior Foreign Application | Country | Foreign Filing | | | | y Attached? | |
| Number(s) | Country | (MM/DD/YYY | T) NOT CI | aimed | Yes | No. | |
| | | | | ╡ ┃ | H | <u> </u> | |
| | | | | J | | | |
| | J ₀ | | | 7 | | | |
| | | | <u> </u> | \(\begin{array}{cccccccccccccccccccccccccccccccccccc | $\overline{\Box}$ | 一一一 | |
| Additional foreign applica | tion numbers ar | e listed on a suppler | nental priority data sh | eet PTO/SB/02 | B attached | hereto. | |

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COM PLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

DECLARATION — Utility or Design Patent Application

| | | ····· | | | | | | - | |
|---|---------------------|-----------------|------------------|-----------|----------|---------------------|----------|-------------|---------------------------|
| Direct all correspondence to: | X Customer | Number: | 31 | 877 | | OR | | Corresp | oondence address below |
| Name | <u> </u> | | 6 [.] | | | | | | |
| Address | | | - | | | | | | |
| City | | | | State | | | | | ZIP |
| Country | | Telephone | | | | Fax | | | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | | | | |
| NAME OF SOLE OR FIRST IN | VENTOR: | | Ape | etition h | | | | s unsign | ned inventor |
| Given Name (first and middle [if any]) | Allen I | David | | | | amily I or Surna | | He | rtz Date |
| Inventor's Signature | 7 | | | | | | | | Feb. 23, 2004 |
| Residence: City Boca Ration | State F1 | orida | | Count | | USA | | Citizer | nship USA |
| Mailing Address 12784 Tulipwood C | Circle | | _ -,- | | <u></u> | _ | | | |
| City Boca Raton | State . Fl | orida | | | ZIP | 33 | 3428 | | Country USA |
| NAME OF SECOND INVENTO | R: · | | | | | | | en filed f | or this unsigned inventor |
| Given Name (first and middle [if any]) | Eric Le | e | | | | amily N Surna | | He | |
| Inventor's Signature | | | | | | | | | Peb. 23, 2004 |
| Residence: City Indian Harbour Beach | State F1 | lorida | | Coun | | USA | | Citizer | nship USA |
| Mailing Address 125 Freddie Street | | | | | | | | | |
| City Indian Harbour Beach | State F | lorida | | | ZIP | 32 | 2937 | Count | USA |
| Additional inventors or a legal rep | oresentative are be | ng named on the | s | uppleme | ntal she | et(s) PT | O/SB/02/ | 4 or 02LR : | attached hereto. |

| Please type a plus sign | (+) inside this box - | → □ |
|-------------------------|-----------------------|------------|
|-------------------------|-----------------------|------------|

PTO/SB/02B (3-97)
Approved for use through 9/30/98. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Supplemental Priority Data Sheet

| Additionalforeignapplications: | | | | | | |
|--|---------------|--|------------------|--------------------------------------|-------------------------|------------------------|
| Prior Foreign Application Number(s) | Country | | eign Filing Date | Priority Not Claimed | Certified Cop YES | y Attached? NO |
| | | | | 00000000000000 | 000000000000000 | 00000000000000 |
| Additional provisional applications: Application Number | | | <u> </u> | Filing Date // | MM/DD/YYYY | |
| | | | | | | |
| Additional U.S. applicat | tions: | | | | | |
| U.S. Parent Applica Number | tion PCT Pare | | | iling Date D/YYYY) | ľ | ent Number licable) |
| 09 / 170,016 09 / 253,238 09 / 597,908 10 / 090,076 | 3 5 | | 02/19 06/19 | 1/1998 1/1999 1/2000 1/2002 | 6,029 6,264 6,695 | ,187 |

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary dependingupon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Office, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.



In The United States Patent and Trademark Office

Appn. No.

Filed Herein

Filed:

2004, February 24 Allen D. Hertz, et al.

Applicants: Title:

METHOD AND APPARATUS FOR MAINTAINING OPERABILITY

OF A FLEXIBLE, SELF CONFORMING, WORKPIECE SUPPORT SYSTEM

Divisional Application of 09/597,905 filed on June 19, 2000.

Statement Requesting Deletion of Non-Inventors

The following are the Inventors for the claims presented in the above stated divisional application:

Inventor No. 1: Allen D. Hertz

Inventor No. 2: Eric L. Hertz

Applicants respectfully request the deletion of Inventor No. 3 of the Parent Application -Anthony Imm - from the above subject Divisional Application.

Respectfully submitted,

Allen B. Hertz

Applicant, Agent of Record, Registration Number: 50,942

Please submit all correspondence concerning this patent application to:

Allen D. Hertz

Registration Number: 50,942

PATENT & TRADEMARK OFFICE

Customer Number: 31877 12784 Tulipwood Circle Boca Raton, Florida 33428

561/883-0115 Tel: Cell: 561/716-3915 561/883-0115 Fax:

PARENT Application

PTO/S8/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

| Under the Paperwork Reduction Act of 1995, 1995 | Attorney Docket Num | nber | | | |
|--|----------------------|----------------|--|--|--|
| DECLARATION FOR UTILITY OR | First Named Inventor | Allon D. Wortz | | | |
| DESIGN | COMPLETE IF KNOWN | | | | |
| PATENT APPLICATION (37 CFR 1.63) | Application Number | 08 /597 905 | | | |
| · | Filing Date | June 15, 2000 | | | |
| X Declaration Declaration Submitted OR Submitted after Initial | Group Art Unit | 3723 | | | |
| with Initial Filing (surcharge (37 CFR 1.16 (e)) required) | Examiner Name | | | | |
| | | | | | |

| A la | by docises that | | | | | |
|--|-------------------------|--|-------------------------|---------------------|--------------------|--|
| As a below named inventor, I hereby declare that: | | | | | | |
| My residence, mailing address, and citizenship are as stated below next to my name. | | | | | | |
| I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | | | |
| Method for Ensuring Planarity When Using a Flexible, Self-Conforming, Workpiece Support System | | | | | | |
| | (Title of th | e Invention) | | | | |
| the specification of which | | | | | | |
| X is attached hereto | | | | | | |
| OR | | | | | | |
| was filed on (MM/DD/YYYY) | | as United Sta | ites Application N | lumber or PCT In | ternational | |
| | | | | | | |
| Application Number | and was a | mended on (MM/DD/YY) | m | | (if applicable). | |
| I hereby state that I have reviewed amended by any amendment spec | and understand the co | ntents of the above ident a. | ified specification | , including the cla | ims, as | |
| I acknowledge the duty to disclose in-part applications, material inform PCT international filing date of the | nation which became av | aliable between the tilling dication. | date of the prior | орриосион син с | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | |
| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Co YES | py Attached? NO | |
| | | | | | | |
| Additional foreign application | numbers are listed on a | a supplemental priority da | ta sheet PTO/SE | 3/02B attached he | ereto: | |

Paret Apo trah

PTO/S8/01 (03-01)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION ¾ Utility or Design Patent Application

| DEGEARCH | | | | | | | | | |
|--|------------------------------|-----------------|--|---|---|--|--|--|--|
| Direct all correspondence to: Customer Numor Bar Code to | | | | OR X Con | respondence address below | | | | |
| Allen D. Hertz, Registration No. 50,942 | | | | | | | | | |
| 12784 Tulipwood Circle | | | | | | | | | |
| Boca Raton | | | State | Florida | ZIP 33428 | | | | |
| United States | Telept | 56 | 1/883 | -0115 | 561/883-0115 Fax | | | | |
| I hereby declare that all statements made herein of are believed to be true; and further that these statemade are punishable by fine or imprisonment, or be validity of the application or any patent issued thereof | my owr ements oth, und | knowledge are | true and the kill (1901) the kill (1901) and | nd that all statements nowledge that willful that such willful fals | s made on information and belief false statements and the like so e statements may jeopardize the | | | | |
| NAME OF SOLE OR FIRST INVENTOR: | | A petition h | as be | en filed for this ur | nsigned inventor | | | | |
| Given Name Allen David (first and middle [if any]) | | | | y Name Hei Imame | tz | | | | |
| tnventor's | | | | | Date 2-27-02 | | | | |
| Signature Boca Raton Residence: City | | Florid State | la | United States Country | United States Citizenship | | | | |
| 12784 Tulipwoo | od Cir | cle | | | · ! | | | | |
| Boca Raton | | Florid State | ia | 33428 ZIP | United States Country | | | | |
| NAME OF SECOND INVENTOR: | | A petition h | as bee | n filed for this un | signed inventor | | | | |
| Given Name (first and middle [if any]) Eric Lee | | | | ily Name He umame | ertz | | | | |
| inventor's | | | | | Date | | | | |
| Signature Indian Harbor Beau Residence: City | ch | Flori | da | United States | United States Citizenship | | | | |
| Mailing Address 125 Freddie St | reet | | | | | | | | |
| Indian Harbor Bea | ch | Flor | ida | 32937 ZIP | United States Country | | | | |
| Additional inventors are being named on the | sisi | | litional l | nventor(s) sheet(s) P | City State 1 4 4 2 STOP ROLL of the check hereto | | | | |

Paret Apolication

Feb 28 02 04:36p

PTC/GED1 (03-01)
Approved for use through 10/31/2002. CMB 0851-0032
U.S. Palent wild Tredemark Office; U.S. DERNITHERN OF COMMERCE
Under the Papermork Reduction Act of 1985, no passages are required to theppoint to a collection of information unless it sentiates 4 yield CMB souther extrates.

| DECLARATION 1/4 Utility or Design Patent Application | | | | | |
|---|--|--|---|--|--|
| Clirect est correspondence to: Customer Number or Bar Code Lisbel OR X Correspondence address below | | | | | |
| Allen D. Hertz, Registration No. 50,943 | 2 | | | | |
| 12784 Tulipwood Circle | | | | | |
| Boca Raton | State | Florida | 2IP 33428 | | |
| United States Telephone | 561/883-0 | 115 | Fax 561/883-0115 | | |
| t hereby deciare that all statements made herein of my own kno ere believed to be true; and further that these statements were made are punishable by the or imprisonment, or both, under 18 validity of the application or any patent issued thereon. | whedge are true and made with the know I U.S.C. 1001 and the | that all statements wiedge that within t at such willful false | made on information and belief blue statements and the like so estatements may jeopardize the | | |
| NAME OF SOLE OR FIRST INVENTOR: A | petition has been | filed for this un | signed inventor | | |
| Given Name Allen David (first and middle (fi any)) | Family 6 or Suma | | 2 | | |
| teremior's Signature | | | Date 2-27-02 | | |
| Residence: City Book Ration State | | United States | United States Citizenship | | |
| 12784 Tulipwood Circle | | | . ~ | | |
| Boca Raton Sun | Florida | 33428 | United States Country | | |
| NAME OF SECOND INVENTOR: | stition has been fil | led for this unsi | gned inventor | | |
| Given Name (first and middle fit amp) Eric Lee Family Hame Or Summans | | | | | |
| Inventor's Signature | | | 2 28.02 | | |
| Indian Harbor Beach Residence: City State | Florida (| United States | United States Chizenship | | |
| Melling Address 125 Freddie Street | | | | | |
| Indian Harbor Beach Such | Florida zu | 32937 | United States Country | | |
| Additional investors are built around on the | what Artefitional Indian | Andel -bMal PTTO | PRETTA stacked bases. | | |

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

| Application Number | |
|------------------------|--|
| Filing Date | February 23, 2004 |
| First Named Inventor | Allen D. Hertz, et al |
| Title | METHOD AND APPARATUS FOR MAINTAINING OPERABILITY OF A FLEXIBLE, SELF |
| Art Unit | CONFORMING, WORKPIECE SUPPORT SYSTEM |
| Examiner Name | |
| Attorney Docket Number | HER-04-01 |

| I hereby appoint: | | <u> </u> | | · · · · · · · · · · · · · · · · · · · | |
|---|---|-------------------------|-----------------------|---------------------------------------|--|
| | with the Customer Number: | | | | |
| or 31877 | | | | | |
| Practitioner(s) named be | low: | | | | |
| | Name | | Registration N | lumber | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| as my/our attorney(s) or agent(Trademark Office connected th | s) to prosecute the application identified erewith. | above, and to trans | sact all business i | n the United States Patent and | |
| Please recognize or change the | e correspondence address for the above | -identified application | on to: | | |
| V | | | on (o. | | |
| The address associate | ed with the above-mentioned Customer | Number: | | | |
| OR | | | | | |
| The address associate | had with Contamon North | | 1 | : | |
| The address associat | ted with Customer Number: | | | | |
| OR Firm or | | · | | | |
| Individual Name | | | | | |
| Address | | | | · · · · · · · · · · · · · · · · · · · | |
| Address | | | | | |
| City | | State | | Zip | |
| Country | | | | | |
| Telephone | | Fax | | | |
| Applicant/Inventor. | | | | : | |
| | the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB/ | 96) | | | |
| , | SIGNATURE of Applican | nt or Assignee of R | Record | | |
| Name Allen D. He | ertz / | | | | |
| Signature /// | 1 | | | | |
| Date February 23, 2004 Telephone 561 883-0115 | | | | | |
| NOTE: Signatures of all the invento forms if more than one signature is | rs or assignees of record of the entire interest required, see below*. | or their representative | e(s) are required. Su | bmit multiple | |
| X *Total of 2 | forms are submitted. | | | | |

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

| Application Number | |
|------------------------|--|
| Filing Date | February 23, 2004 |
| First Named Inventor | Allen D. Hertz, et al |
| Title | METHOD AND APPARATUS FOR MAINTAINING OPERABILITY OF A FLEXIBLE, SELF |
| Art Unit | CONFORMING, WORKPIECE SUPPORT SYSTEM |
| Examiner Name | |
| Attorney Docket Number | HER-04-01 |

| I hereby appoint: | | | | | | |
|--|---|-------------------------------|--|--|--|--|
| X Practitioners associated with the Customer Number: | | | | | | |
| OR | | 31877 | | | | |
| Practitioner(s) named below | r: | | | | | |
| | Name Registration Number | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| as my/our attorney(s) or agent(s) t Trademark Office connected there | o prosecute the application identified with. | above, and to transact a | I business in the United States Patent and | | | |
| Please recognize or change the co | orrespondence address for the above | -identified application to: | | | | |
| া ত | with the above-mentioned Customer | | | | | |
| OR | | | · · · · · · · · · · · · · · · · · · · | | | |
| The address associated | with Customer Number: | | | | | |
| OR | <u> </u> | | | | | |
| Firm or Individual Name | | | | | | |
| Address | | | | | | |
| Address | | State | Zip | | | |
| City Country | | State | | | | |
| Telephone | | Fax | | | | |
| lam the: | | | | | | |
| X Applicant/Inventor. | | | | | | |
| | e entire interest. See 37 CFR 3.71. R 3.73(b) is enclosed. (Form PTO/SB/ | 96) | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | |
| Name Eric L. Hertz | | 16 | | | | |
| Signature In Hong | Koy - SEC Parent | | with Leh elephone 321 773-2844 | | | |
| Date February 23, | <u> </u> | | | | | |
| NOTE: Signatures of all the inventors of forms if more than one signature is rec | or assignees of record of the entire interest quired, see below*. | or their representative(s) ar | e required. Submit multiple | | | |
| [V] 2 | rms are submitted. | | | | | |

This collection of information is required by 37 CFR 1.31 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Copy- Part mo:

| Please type a plus sign (+) inside | e this box | | | | F | PTO/SB/81 (02-01) |
|--|--|---------------------------------|---|-----------------------|--|-------------------------------|
| | | | | | | OMB 0651-0035 FOF COMMERCE |
| Under the Paperwork Reduction Act of 19 | 995, no persons are required to res | pond to a collection of I | nformation | untess it ors | pray a valu On | AB COUNTY HEATINGS. |
| | | Application Numi | | 09/ | 592, 7 | 01 |
| | | Filing Date | | | .00 | |
| | | First Named Inventor | | Allen D. Hertz | | |
| POWER OF ATT | | Title SE | TE CONEC | RMING, WC | RKPIECE SU | PPORT SYSTEM |
| AUTHORIZATION | AUTHORIZATION OF AGENT | | | | | |
| | | Examiner Name | | - | | |
| | | Attorney Docket | Number | <u> </u> | | T070000E4918 |
| | | | | Express | Mail No. E | T878922548US |
| I hereby appoint: | | | | | | |
| ,• • • | | | 1 | | Place Custo Number Bai | |
| Practitioners at Co | ustomer Number | | J | | Label here | |
| OR | ned helow | | | L | | |
| A Pracutioner(s) name | Name | | Re | gistratio | n Number | |
| Allen D. H | | | | 0,942 | | |
| Andi D. I | 10102 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | d to tranca | AT 211 |
| as my/our attorney(s) or | agent(s) to prosecute the | e application idea | ntified at ected the | oove, and erewith. | d to transa | ct all |
| business in the United S | tates Patent and Tradem | ark Office confid | cced uic | ewiui. | | ct all |
| business in the United S Please change the corre | spondence address for the | ark Office confid | cced uic | ewiui. | | ct all |
| business in the United S Please change the corre The above-mention | tates Patent and Tradem | ark Office confid | cced uic | cation to | : ce Customer | |
| business in the United S Please change the corre The above-mention OR | spondence address for the Customer Number. | ark Office confid | cced uic | cation to | : ce Customer nber Bar Coo | |
| business in the United S Please change the corre The above-mention | spondence address for the Customer Number. | ark Office confid | cced uic | cation to | : ce Customer | |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR V Firm or | spondence address for the Customer Number. | ark Office confid | cced uic | cation to | : ce Customer nber Bar Coo | |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name | States Patent and Tradem spondence address for the Customer Number. Stomer Number Allen D. Hertz | he above-identifi | cced uic | cation to | : ce Customer nber Bar Coo | |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address | states Patent and Tradem spondence address for the Customer Number. | he above-identifi | ed applic | Plan Nun Lat | ce Customer mber Bar Cod nel here | de |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address | States Patent and Tradem spondence address for the Customer Number. Stomer Number Allen D. Hertz | he above-identifi | ed applic | cation to | : ce Customer nber Bar Coo | |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City | states Patent and Tradem spondence address for the Customer Number. Stomer Number Allen D. Hertz 12784 Tulipwood C | eircle | ed appli | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address | states Patent and Tradem spondence address for the Customer Number. Stomer Number Allen D. Hertz 12784 Tulipwood C | he above identifi | ed appli | Plan Num Late | ce Customer mber Bar Cod nel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone | states Patent and Tradem spondence address for the Customer Number. Stomer Number Allen D. Hertz 12784 Tulipwood C Boca Raton United States | he above identifi | ed application of the state of | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer Number United States 561/883-011 | he above identifi | ed application of the state of | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States Boca Raton United States 561/883-0115 | circle | ed applicated Fl | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States 561/883-011: tor. ord of the entire interest. | See 37 CFR 3.7 | ed applicate Flax | Plan Num Lab | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States 561/883-0115 tor. ord of the entire interest. er 37 CFR 3.73(b) is encire | See 37 CFR 3.7 osed. (Form PTC | tate Fl | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent Statement unde | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States 561/883-0115 tor. ord of the entire interest. ar 37 CFR 3.73(b) is encional supplies the customer s | See 37 CFR 3.7 osed. (Form PTC | tate Fl | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| business in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent Statement unde | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States 561/883-0115 tor. ord of the entire interest. er 37 CFR 3.73(b) is encire | See 37 CFR 3.7 osed. (Form PTC | tate Fl | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| Dusiness in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent Signature Name A | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer States 561/883-0113 tor. ord of the entire interest. or 37 CFR 3.73(b) is enclosed and the Customer Signature of Applemen D. Hertz | See 37 CFR 3.7 osed. (Form PTC | tate Fl | Plan Num Late | ce Customer mber Bar Coo sel here | 33428 |
| Dusiness in the United S Please change the corre The above-mention OR Practitioners at Cus OR X Firm or Individual Name Address Address City Country Telephone I am the: X Applicant/Invent Signature Name A | states Patent and Tradem spondence address for the Customer Number. Allen D. Hertz 12784 Tulipwood Customer Number United States 561/883-0113 Tor. Tor. SIGNATURE of Applem D. Hertz Druary 27, 2002 | See 37 CFR 3.7 psed. (Form PTC) | tate Fl | orida 5 | ce Customer mber Bar Cod eel here Zip 61/883-0 | 33428 115 |

| Please type a plus sign (+) im | aldo this box | II-9. Putonka | Appic Appic | wed for using | iliyough 10/3 | PTO/SB/81 (02 1/2502, OMB 9651-0 | 1035 |
|--|--|------------------------|----------------------|---------------|---|-------------------------------------|------|
| Under the Papersrork Keduction Act o | N OJ Desirate ere received to M | expend to a collection | वां व्यक्ति | olion galem | g deplay a ve | MENT OF COMMEN | ève. |
| | | Application M | trinber. | 0 | 5/5-57 | 1945. | |
| | | Filing Date - | Filing Date | | Un E 13 | 20.00 | |
| | | | First Named Inventor | | lien D. H | | |
| POWER OF AT | | Tittle | Title SKILL CONK | | | nen using a «Le s support system | |
| AUTHORIZATIO | IN OF AGENT | Group Art Uni | Group Art Unit | | | | |
| | | Exeminer Nam | Examiner Name | | | | |
| | · | | | beer | | | |
| | | | | Eqpt | rees Mail N | la. E187892254 | BUS |
| I hereby appoint: | | | | | | | |
| Practitioners at C | Customer Number | |] — | | Place Co Number Label ha | Bar Code | · |
| X Practitioner(s) na | med below: | | | | | | |
| Aller D | Name | | | | tion Numb | CT | |
| Allen D. | Hertz | <u> </u> | - | 50,942 | - | | |
| | | | | | | | |
| | | | - | | | | |
| L | | | L | | | | |
| as my/our attorney(s) or business in the United S | r agent(s) to prosecute the States Patent and Tradem | application ide | entified lected t | above, a | and to train | sact all | |
| | expondence address for the ned Customer Number. | ie above Identii | led app | - [i | to; Place Guston Vumber Bar (Label here | | |
| X Firm or individual Name | TY Firm or Allen D. Herts | | | | | | |
| Address | 12784 Tulipwood Ci | | | | | | |
| Address | | | | | | • | |
| City | Boca Raton | s | i etst | Florida | Ζīρ | 33428 | |
| Country | United States | United States | | | | | |
| Telephone | 561/883-0115 | 5 Fex | | | 561/883-0115 | | |
| I am the: | | | | | | | |
| Applicant/invento | or. | | | | | | |
| Assignee of reco | | | | | | | |
| | ord of the entire interest. Ser 37 GFR 3.73(b) is enclos | | | پ | | | |
| | 37 CFR 3.73(b) is enclos | sed (Form PTO | VSB/98 | | | | |
| Statement under | | sed (Form PTO | VSB/98 | | | | |
| Statement under | SIGNATURE of Applic | sed (Form PTO | VSB/98 | | | | |
| Statement under Name Erig Signature Date | SIGNATURE of Application (1). Hertz | sed. (Form PTC | 0/S8/96 of Rec | cord | | | |
| Statement under Name Erig Signature | SIGNATURE of Application of the control of the cont | sed. (Form PTC | 0/S8/96 of Rec | cord | ic(s) are req | ulred. Submit mult | iple |

Burden Heur Statement: This form is estimated to take 3 minutes an complete. They will vary deparating upon the needs of the individual ones. Any comments on the amount of time wou are required in comment mix form should be eard to the Crief Information Offices, U.S. Paring and Trademark Offices, Washington, DC